

## **ASSIGNMENT LOG**

BUSINESS AND PROFESSIONS DIVISION REAL ESTATE APPRAISER SECTION P.O. BOX 9015 OLYMPIA, WA 98507-9015 dol.wa.gov

Dates: From\_\_\_\_\_\_ To \_\_\_\_\_

Assignments For <i>(Name)</i> :					Page	of
CLIENT	CLIENT CONTACT			CLIENT TEL	EPHONE NO.	ACCOMPANIED (SUPERVISOR'S INITIALS)
BORROWER/OWNER	I	PROP.	TYPE CODE	HOURS		
PROPERTY ADDRESS (Street, city, state, zip)				DATE		
CLIENT	CLIENT CONTACT			CLIENT TELEPHONE NO.		ACCOMPANIED (SUPERVISOR'S INITIALS)
ORROWER/OWNER	I	PROP.	TYPE CODE	HOURS		
PROPERTY ADDRESS (Street, city, state, zip)				DATE		
CLIENT	CLIENT CONTACT			CLIENT TELEPHONE NO.		ACCOMPANIED (SUPERVISOR'S INITIALS)
ORROWER/OWNER		PROP.	TYPE CODE	HOURS		
PROPERTY ADDRESS (Street, city, state, zip)				DATE		
CLIENT	CLIENT CONTACT			CLIENT TEL	EPHONE NO.	ACCOMPANIED (SUPERVISOR'S INITIALS)
ORROWER/OWNER		PROP.	TYPE CODE	HOURS		
ROPERTY ADDRESS (Street, city, state, zip)				DATE		
CLIENT	CLIENT CONTACT			CLIENT TEL	EPHONE NO.	ACCOMPANIED (SUPERVISOR'S INITIALS)
BORROWER/OWNER	I	PROP.	TYPE CODE	HOURS		
PROPERTY ADDRESS (Street, city, state, zip)				DATE		
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BORROWER/OWNER	PROP. TYPE CODE		HOURS			
PROPERTY ADDRESS (Street, city, state, zip)				DATE		
CLIENT	CLIENT CONTACT		CLIENT TEL	EPHONE NO.	ACCOMPANIED (SUPERVISOR'S INITIALS)	
ORROWER/OWNER	R/OWNER		P. TYPE CODE	HOURS		
PROPERTY ADDRESS (Street, city, state, zip)				DATE		
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			1 SFR nor 2 SFR cor		Property Type ( 3 SFR land 4 Commercial form	5 Commercial narrative
Supervisory Appraiser Attesta n accordance with WAC 308-125-09 nat I have accompanied this applicar	5 (e) (i), I,					
ignature of Supervisory Appraiser X				Date		
PR.622.185 ASSIGNMENT LOG (N/3/06)W						gual access to its services. 6504 or TTY (360) 664-888